

| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2006 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) | | Docket Number (Optional) 09867/0204692-US0 | | | | | | | | | | | | | | | | | | |
|--|--|---|--|------------|-------------------------|---|-------|------|---|-------|-------|---|--------|-------|--|--------|-------|--|--------|--------|
| Application Number 10/596,345-Conf. #5514 | | Filed June 9, 2006 | | | | | | | | | | | | | | | | | | |
| For CARD GAME SYSTEM | | | | | | | | | | | | | | | | | | | | |
| Art Unit N/A | Examiner | Not Yet Assigned | | | | | | | | | | | | | | | | | | |
| <p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):</p> <table> <thead> <tr> <th></th> <th style="text-align: center;"><u>Fee</u></th> <th style="text-align: center;"><u>Small Entity Fee</u></th> </tr> </thead> <tbody> <tr> <td><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td style="text-align: center;">\$120</td> <td style="text-align: center;">\$60</td> </tr> <tr> <td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td style="text-align: center;">\$450</td> <td style="text-align: center;">\$225</td> </tr> <tr> <td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td style="text-align: center;">\$1020</td> <td style="text-align: center;">\$510</td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td style="text-align: center;">\$1590</td> <td style="text-align: center;">\$795</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td style="text-align: center;">\$2160</td> <td style="text-align: center;">\$1080</td> </tr> </tbody> </table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input checked="" type="checkbox"/> Payment by credit card.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>04-0100</u>. I have enclosed a duplicate copy of this sheet.</p> | | | | <u>Fee</u> | <u>Small Entity Fee</u> | <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$120 | \$60 | <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$450 | \$225 | <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$1020 | \$510 | <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$1590 | \$795 | <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$2160 | \$1080 |
| | <u>Fee</u> | <u>Small Entity Fee</u> | | | | | | | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$120 | \$60 | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$450 | \$225 | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$1020 | \$510 | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$1590 | \$795 | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$2160 | \$1080 | | | | | | | | | | | | | | | | | | |
| <p>I am the <input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>47,522</u></p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____</p> | | | | | | | | | | | | | | | | | | | | |
| <u>/FB/ Flynn Barrison (53,970)</u> | | <u>June 14, 2007</u> | | | | | | | | | | | | | | | | | | |
| Signature | | Date | | | | | | | | | | | | | | | | | | |
| <u>Louis J. DeJudice</u> | | <u>(212) 527-7791</u> | | | | | | | | | | | | | | | | | | |
| Typed or printed name | | Telephone Number | | | | | | | | | | | | | | | | | | |
| <small>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</small> | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | Total of <u>1</u> forms are submitted. | | | | | | | | | | | | | | | | | | | |